

# Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

ALAN KEYES FOR PRESIDENT 2008

<b>A.</b> Full Name (Last, First, Middle Initial) John Anonymous Mailing Address 9952 CR 54 City State Zip Code Milliken CO 80543 FEC ID number of contributing federal political committee. Name of Employer Occupation Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 324.00	Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 9 / 2 0 0 8 Amount of Each Receipt this Period 50.00 Donation Transaction ID: SA17A.5235
<b>B.</b> Full Name (Last, First, Middle Initial) Mr Edgar Aronson Mailing Address 219 E 48th St City State Zip Code New York NY 10017-1538 FEC ID number of contributing federal political committee. Name of Employer Occupation Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 300.00	Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 1 8 / 2 0 0 8 Amount of Each Receipt this Period 300.00 Donation Transaction ID: SA17A.4907
<b>C.</b> Full Name (Last, First, Middle Initial) Mrs. Leanore E. Bartos Mailing Address 51064 887 Rd. City State Zip Code Verdigre NE 68783-6063 FEC ID number of contributing federal political committee. Name of Employer Occupation Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00	Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 0 8 / 2 0 0 8 Amount of Each Receipt this Period 250.00 Donation Transaction ID: SA17A.4329

**SUBTOTAL** of Receipts This Page (optional) .....

600.00

**TOTAL** This Period (last page this line number only) .....